AMENDMENT TRANSMITTAL LETTER					Docket No. 17452/016001
Application No. 10/539,519-Conf. #2864 Applicant(s): Frederic Berier et a		Filing Date Examiner June 17, 2005 J. M. Lampre			Art Uni
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The fee has beer	calculated an				
-	Claims	Highest	S AS AMENI) <u>-</u>	
	Remaining After Amendment	Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	22	- 22 =	0	x 26.00	0.00
Independent Claims	2	- 3 =	0	x 110.00	0.00
A check in the Payment by The Director as described X Credit at	ge Deposit Acc ne amount of \$ credit card. is hereby auth below. ny overpaymer iny additional fil	ount No	to cover	x Small Entity In the amount of \$ the filing fee is encluded Deposit Account Note The filing fee is encluded The filing fee is encluded.	osed. o50-0591
Attorney/Agent OSHA · LIANG 909 Fannin Stre	Reg. No.: 33,				